FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Secretary of State

APPROVED
AND
FILED

95 APR -7 AM 5:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000042188 (0)**

1. Corporate Name

THE WAY OF THE WEST INC.

Principal Place of Business
6658 THIRD AVE NORTH
ST PETERSBURG FL 33710

Mailing Address
6658 THIRD AVE NORTH
ST PETERSBURG FL 33710

DO NOT WRITE IN THIS SPACE

3. Date of Incorporation: 06/01/1994
3a. Date of Last Report:

2. Principal Place of Business
21
State Apt # etc
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
State Apt # etc
27
City & State
28
Zip 29 Country 30

4. FEI Number ☐ Applied For ☒ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

WOLFE, LARRY
200-A JOHN KNOX ROAD
TALLAHASSEE FL 32303-6643

10. Name and Address of New Registered Agent

81 Name: Myron M. Dawes
82 Street Address (P.O. Box Number is Not Acceptable): 6658 3RD Ave. N.
83
84 City: St. Petersburg FL 85 Zip Code: 33710

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: [signature] DATE: 03/24/95

12. OFFICERS AND DIRECTORS	
TITLE	D
NAME	DAWES, MYRON M
STREET ADDRESS	6658 THIRD AVE NORTH
CITY-ST-ZIP	ST PETERSBURG FL 33710
TITLE	D
NAME	DAWES, BRENDA G
STREET ADDRESS	6658 THIRD AVE NORTH
CITY-ST-ZIP	ST PETERSBURG FL 33710

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (blank; ☐ Change ☐ Addition)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on the annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] 03/24/95 813-341-1712

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR